Application Data Sheet

Application Information

Application number::

Filing Date::

11/09/01

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

PRACTICAL IN VITRO SIALYLATION OF

RECOMBINANT GLYCOPROTEINS

Attorney Docket Number::

019957-011211US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

2

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

Applicant Information

Applicant Authority Type::

Inventor

US Primary Citizenship Country::

Full Capacity Status::

James Given Name::

C. Middle Name::

Paulson Family Name::

Name Suffix::

Del Mar City of Residence::

CA State or Province of Residence::

US Country of Residence::

209 Torrey Pines Terrace Street of Mailing Address::

Del Mar City of Mailing Address::

CA State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address:: 92014

Inventor Applicant Authority Type::

US **Primary Citizenship Country::**

Full Capacity Status::

Robert Given Name::

J. Middle Name::

Bayer Family Name::

Name Suffix::

City of Residence:: San Diego

State or Province of Residence:: **USUS**

Country of Residence::

6105 Dirac Street Street of Mailing Address::

CACA

San Diego City of Mailing Address::

State or Province of mailing address:: CACA

Country of mailing address::

Postal or Zip Code of mailing address:: 92122

Inventor Applicant Authority Type::

> Initial 11/9/01 Page 2

Assignee Information

Street of mailing address::

Assignee Name::

	Primary Citizenship Co	ountry::	US					
	Status::		Full Ca	pacity				
	Given Name::		Eric		-	•		
	Middle Name::							
	Family Name::		Sjoberg	9				
	Name Suffix::							
	City of Residence::		San Di	ego				
	State or Province of R	esidence::	CA					
	Country of Residence:	:	US	•				
	Street of Mailing Address::		12639	Crest Knolls Cou	ırt			
	City of Mailing Address::		San Di	ego				
	State or Province of m	ailing address::	CA					
	Country of mailing add	lress::						
	Postal or Zip Code of	mailing address::	92130					
Correspondence Information								
	Correspondence Cust	omer Number::	20350					
Representative Information								
	Representative Custor	mer Number::	20350					
	Domestic Priority Information							
	Application::	Continuity Type::		Parent Applicati	on:: F	arent Filing D	ate::	
	This Application	Divisional of		09/007,741	0	1/15/98		
	_							
	Foreign Priority Information							
	Country::	Applicatio	n numb	er:: Filin	g Date	••		

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::